

Fill in this information to identify the case:

Debtor Name DUKAT LLC

United States Bankruptcy Court for the: _____ District of New Jersey

Case number: 21-14934

Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: JULY

Date report filed:

08/23/2021
MM/DD/YYYY

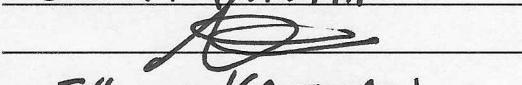
Line of business: E-commerce

NAISC code:

454110

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Elliott KATTAN

Original signature of responsible party 

Printed name of responsible party Elliott KATTAN

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes No N/A

If you answer **No** to any of the questions in lines 1-9, attach an explanation and label it **Exhibit A**.

- | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer **Yes** to any of the questions in lines 10-18, attach an explanation and label it **Exhibit B**.

- | | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name Delta LLC

Case number 21-14934

17. Have you paid any bills you owed before you filed bankruptcy?
18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ -95.56

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 1425.00

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

- \$ 293

Report the total from *Exhibit D* here.

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

+ \$ 1036.44

This amount may be different from what you may have calculated as *net profit*.

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

= \$ 1036.44

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

\$ -0-

24. Total payables

(*Exhibit E*)

Debtor Name DUKAT LLC

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4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables

(*Exhibit F*) TRAJISUM Note
4,000,000 + INTEREST

\$ 4,000,000

5. Employees

26. What was the number of employees when the case was filed?

-0-

27. What is the number of employees as of the date of this monthly report?

-0-

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case?

\$ -0-

29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?

\$ 45,000

30. How much have you paid this month in other professional fees?

\$ -0-

31. How much have you paid in total other professional fees since filing the case?

\$ -0-

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<i>Column A</i>	<i>Column B</i>	<i>Column C</i>
	Projected	Actual	Difference
	Copy lines 35-37 from the previous month's report.	Copy lines 20-22 of this report.	Subtract Column B from Column A.
32. Cash receipts	\$ _____	- \$ <u>1425.00</u>	= \$ <u>1425</u>
33. Cash disbursements	\$ _____	- \$ <u>368.00</u>	= \$ <u>368</u>
34. Net cash flow	\$ _____	- \$ <u>1036.44</u>	= \$ <u>1036.44</u>

35. Total projected cash receipts for the next month: \$ _____

36. Total projected cash disbursements for the next month: - \$ _____

37. Total projected net cash flow for the next month: = \$ _____

Debtor Name

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8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- 39. Bank reconciliation reports for each account.
- 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- 41. Budget, projection, or forecast reports.
- 42. Project, job costing, or work-in-progress reports.

In re DYKES LLC
Debtor

Case No. 21-14934
Reporting Period: JULY

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES PAID

This schedule is to include all retained professional payments from case inception to current month.

Payee	Period Covered	Amount Approved	Payor	Check Number	Date	Fees	Amount Paid	Year-To-Date Fees	Expenses	Amount Paid	Year-To-Date Fees	Expenses
WILENTZ	-0-		ELLIOTT KATTAN					30,000				
BEDERSON	-0-		ELLIOTT KATTAN					15,000				

	Month	Month
ASSETS	JULY 1036.44	
Cash (Unrestricted)		
Cash (Restricted)		
Accounts Receivable (Net)		
Inventory		
Notes Receivable	4,000.00	
Prepaid Expenses		
Other (Attach List)		
Total Current Assets		
Property, Plant & Equipment		
Real Property & Improvements		
Machinery & Equipment		
Furniture, fixtures & Office Equipment		
Vehicles		
Leasehold Improvements		
Less: Accumulated Depreciation/Depletion		
Total Property, Plant & Equipment		
Due from Affiliates & Insiders		
Other (Attach List)		
Total Assets		
Liabilities Not Subject to Compromise (Postpetition Liabilities)		
Accounts Payable		
Taxes Payable		
Notes Payable		
Professional Fees		
Secured Debt		
Due to Affiliates & Insiders		
Other (Attach List)		
Total Postpetition Liabilities		
Liabilities Subject to Compromise (Pre-petition Liabilities)		
Secured Debt - Per Plan		
Priority Debt - Per Plan		
Unsecured Debt - Per Plan		
Other (Attach List) - Per Plan		
Total Pre-petition Liabilities	2,228,731.60	
Total Liabilities		
Equity		
Common Stock		
Retained Earnings (Deficit)		
Total Equity (Deficit)	1,772,304.84	
Total Liabilities & Owners' Equity		

8/22/2021

Sterling National Bank Checking account

Jul 30, 2021 SERVICE CHARGE 25.00 36.44

Jul 08, 2021 TRANS FROM 1025813 200.00 61.44

Jul 07, 2021 UnitedHealthcare PREMIUM_KATTAN E_3073825521 268.00 -138.56

Jul 06, 2021 DEPOSIT 225.00 129.44

Jun 30, 2021 RR-REMOTE DEP MONTHLY MAINT 75.00 -95.56

Date 7/30/21 Page 1
Account Number 290282977
Enclosures

DUKAT LLC
95 NEW FIELD AVE SUITE H
EDISON NJ 08837

CHECKING ACCOUNT

FREE BUSINESS CHECKING	Number of Enclosures	0
Account Number 290282977	Statement Dates 7/13/21 thru 8/01/21	
Previous Balance .00	Days in the statement period	20
1 Deposits/Credits 1,000.00	Average Ledger	950.00
Checks/Debits .00	Average Collected	950.00
Service Charge .00		
Interest Paid .00		
Current Balance 1,000.00		

Activity in Date Order

Date	Description	Credits	Debits
7/14	Telephone Transfer Credit	1,000.00	1,000.00

Daily Balance Information

Date	Balance	Date	Balance
7/13	.00	7/14	1,000.00